(Revised 06/2012)

Only

# STATEMENT OF

PAGE 1 / 15 =

FEC FORM 1		0	RGAN	IIZAT	101	V												
												Offi	ice Us	e On	y			
1. NAME OF COMMITTEE (in	n full)		Check if nams changed)		Exampl over the	e:If typii e lines.	ng, type	Э	12	FE4	M5	_	_					
Montanans f	or Test	er						1 1										
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		PO Box 1	1135															
ADDRESS (number a	•																	┙
		Helena Cl	TY 🛦						STA	T TE 4	.	5962	<u>2</u> 4	 ZIF	]-[	DE 🛦		
COMMITTEE'S E-MA	AIL ADDRES	SS																
(Check if a is changed		testerco	mpliance@bl	uesummits	solution	s.com												
		Optional	Second E-Ma	ail Addres	s													
																		╛
COMMITTEE'S WEB  (Check if a is changed)	address	•	RL) w.jontester.co	m 														
2. DATE 0		D / Y	y y y 2024															
3. FEC IDENTIFIC	CATION NU	JMBER ▶		C0041	2304													
4. IS THIS STATE	MENT	NEW	(N) O	R	×	AMEN	IDED (A	<b>A</b> )										
I certify that I have e	examined th	is Stateme	nt and to the	e best of r	my knov	wledge a	and bel	ief it i	s true	e, co	rrect	and	com	olete.				
Type or Print Name	of Treasurer	Debruyo	ker, Brett, , ,															
Signature of Treasure	er <u>Debru</u>	ıycker, Bret	t, , ,						Date		M M	′	08	B D	/ Y	202	4	Y
NOTE: Submission of	false, errone		omplete inform										enal	ties c	f 52	U.S.C	. §30	109.
Office Use						r further						ı	FE(	C F	_			_

Toll Free 800-424-9530

Local 202-694-1100

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete t information below.)	he candidate
Name of Candidate Tester, R., Jon, ,	
Candidate Party Affiliation  DEM  Office Sought:  House  X Senate President	State MT District 00
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republicar	ic, n, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ted organization is a:
Corporation Corporation w/o Capital Stock Labor C	Organization
Membership Organization Trade Association Cooper	rative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid F	PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Committees Participating in Joint Fundraiser	
1. C	

1	FEC Form 1 (	(Revised 02/2009)	Page <b>3</b>
٧	Vrite or Type Commit	ttee Name	
	Montanans	s for Tester	
6.		nnected Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
	Tester Victory	y Fund	
	Mailing Address	946 Bandmann Trl	
		Missoula MT 59	9802
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship:	Connected Organization	Leadership PAC Sponso
			_
7.	Custodian of Reco	ords: Identify by name, address (phone number optional) and position of the person in position.	ssession of committee
		Moore, Tracie, , ,	
	Full Name		
	Mailing Address	PO Box 1135	
		Helena	9624 
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Assistant Treasurer	Telephone number	-   401   -   0501
8.		e name and address (phone number optional) of the treasurer of the committee; and tent (e.g., assistant treasurer).	he name and address of
	Full Name of Treasurer	Debruycker, Brett, , ,	
	or freasurer	PO Box 1135	
	Mailing Address		
		Helena MT 59	9624
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	314	-  401   -  0501

FEC Form 1	(Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent		
Mailing Address		
Title or Desition	CITY ▲ STATE ▲	ZIP CODE ▲
Title or Position •		
Banks or Other safety deposit bo	<b>Depositories:</b> List all banks or other depositories in which the committee deposits fund xes or maintains funds.	s, holds accounts, rents
Name of Bank, D	Depository, etc.	
Mailing Address	First Interstate Bank PO Box 4667	
	Missoula MT €	59801 ZIP CODE ▲
Name of Bank, D	Depository, etc.	
	Amalgamated Bank	
Mailing Address	1825 K Street, NW	
	Washington DC 2	20006
	CITY ▲ STATE ▲	ZIP CODE ▲

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Page	of	. •	

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
Blue Senate Candid			
Mailing Address	600 PENNSYLVANIA AVE SE #15180		
	Washington	DC	20003
	OITV	STATE ▲	ZIP CODE ▲
	CITY ▲  ed Organization	int Fundraising Representa	ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Jo		ative Leadership PAC Spo
Connecte  Designated Agent: Identi	ed Organization Affiliated Committee X Jo		ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Jo		Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	Affiliated Committee X Jo	int Fundraising Representa	
Connecte  Designated Agent: Identi  Full Name	Affiliated Committee X Jo		Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee X Jo  fy by name, address (phone number – optional)  CITY   CITY	int Fundraising Representa	
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Mailing Address  Banks or Other Deposition of the Deposi	Affiliated Committee X Journal of Journal of States (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	state  Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Deposite afety deposit boxes or make the property of the pro	Affiliated Committee X Journal of Journal of States (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which an aintains funds.	state  Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	С
2. [			FEC ID number	С
3. 🗆			FEC ID number	C
4. [			FEC ID number	C
6. <b>Name</b> 6	of Any Connected O	rganization, Affiliated Committee, Joint Fur	ndraising Representative	or Leadership PAC Sponsor
	ate OH & MT			
M	ailing Address	600 PENNSYLVANIA AVE SE #15180		
	g			
		Washington	DC	20003
R	elationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected (	Organization Affiliated Committee X Jo	oint Fundraising Representa	tive Leadership PAC Sponsor
_	ated Agent: Identify b	by name, address (phone number – optional)		1
Mai	ling Address			
Mai				
Mai				
	ling Address	CITY A	STATE A	ZIP CODE A
	ling Address	CITY A	STATE   Telephone Number	ZIP CODE <b>A</b>
9. Banks safety of Name of	ling Address  TLE OR POSITION ▼  or Other Depositoric leposit boxes or main	es: List all banks or other depositories in which	Telephone Number	s funds, holds accounts, rents
9. Banks safety of Name of Deposite	or Other Depositoric leposit boxes or main of Bank,	es: List all banks or other depositories in which	Telephone Number	s funds, holds accounts, rents
9. Banks safety of Name of Deposite	or Other Depositorie leposit boxes or main of Bank, bry, etc.	es: List all banks or other depositories in which	Telephone Number	s funds, holds accounts, rents

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h). <b>Joint Fundraisi</b> r		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
SENATE IMPACT 20	)24 		
Moiling Address	600 PENNSYLVANIA AVE SE #15180		
Mailing Address			
	Washington	, DC	20003
Relationship:			
Helationship.	CITY ▲	STATE ▲	ZIP CODE ▲
0	al Committee Affiliated Committee	Construction December	tion DAO O
	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
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esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)	STATE A	Leadership PAC Spanish
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Deposito	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	600 Pennsylvania Ave. SE		
	#15180		<u> </u>
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identif	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name			
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	CITY A  pries: List all banks or other depositories in which	Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, repository, etc.	CITY A  pries: List all banks or other depositories in which	Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, repository, etc.	CITY A  pries: List all banks or other depositories in which	Telephone Number	

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	g Participant:		
1.		FEC ID number	С
2.	<u> </u>	FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
		_	
lame of Any Connected , Blue Senate 2024	Organization, Affiliated Committee, Joint Fo	undraising Representative	e, or Leadership PAC Spon
Mailing Address	600 PENNSYLVANIA AVE SE #15180		
	Washington	DC DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name			
Mailing Address			
	1		1
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
1	CITY A	STATE ▲ Telephone Number	ZIP CODE A
anks or Other Depositor	ries: List all banks or other depositories in wl	Telephone Number	
anks or Other Depositor afety deposit boxes or ma	ries: List all banks or other depositories in whintains funds.	Telephone Number	s funds, holds accounts, rent
anks or Other Depositor afety deposit boxes or ma	ries: List all banks or other depositories in whintains funds.	Telephone Number	s funds, holds accounts, rent
tanks or Other Depositor afety deposit boxes or malame of Bank, depository, etc.	ries: List all banks or other depositories in wlintains funds.	Telephone Number	s funds, holds accounts, rent

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:		
1. [			FEC ID number	С
2. [			FEC ID number	С
3. [			FEC ID number	С
4. [			FEC ID number	С
	. (			
	NV VICTORY FUN	rganization, Affiliated Committee, Joint Fundra D	ising Representativ	e, or Leadership PAC Sponsor
N	Mailing Address	611 PENNSYLVANIA AVE SE		
		SUITE 143		
		WASHINGTON	DC	20003
F	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected (	Organization Affiliated Committee X Joint I	Fundraising Represent	ative Leadership PAC Sponsor
	ated Agent: Identify I	py name, address (phone number – optional)		
Ма	iling Address			
		<u> </u>		I I-I I
TI	TLE OR POSITION <b>T</b>	CITY A	STATE ▲	ZIP CODE ▲
			ephone Number	
0 <b>Banks</b>	au Othau Danasitavia	and list all hanks an other depositories in which the	o committee denoci	to friends, holds, accounts, roots
	deposit boxes or main	es: List all banks or other depositories in which that all banks.	ne committee deposi	is lunds, noids accounts, rents
	of Bank, tory, etc.			
	Mailing Address			

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
-	d Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Spons
MAJORITY 2024			
Mailing Address	PO BOX 65322		
	WASHINGTON	DC	20035
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X  ify by name, address (phone number – optional	Joint Fundraising Represent	ative Leadership PAC Sp
			Leadership FAC St
esignated Agent: Ident			Leadership FAC Sp
esignated Agent: Ident			Leadership FAC Sp
esignated Agent: Ident			Leadership FAC Sp
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esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optiona		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional	STATE A Telephone Number	ZIP CODE A
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esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITIO	ories: List all banks or other depositories in what intains funds.	STATE A  Telephone Number	ZIP CODE A
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# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
4		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	401 2ND AVE S		
	STE 303		
	SEATTLE	WA	98104
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		oint Fundraising Represent	
Designated Agent: Identi	y by name, address (phone number – optional)		ative Leadership PAC Spo
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identi	y by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Identi  Full Name   Mailing Address	y by name, address (phone number – optional)		
Pesignated Agent: Identi  Full Name   _   _    Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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	Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
		,	
Name of Any Connected (	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponsor
SCHUMER MAJORIT			
Mailing Address	600 PENNSYLVANIA AVE SE #15180		
. J			
	WASHINGTON	ı DC ı	20003
Dalatianahin			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected  Designated Agent: Identify	by name, address (phone number - optional)	)	
	by name, address (phone number – optional)	)	
Designated Agent: Identify	by name, address (phone number – optional)		
Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
Designated Agent: Identify  Full Name    Mailing Address	CITY		ZIP CODE A
Designated Agent: Identify  Full Name	CITY	STATE A Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	С
6. Name	of Any Connected C	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
OF	I MT AZ VICTORY I	FUND		
	Mailing Address	600 PENNSYLVANIA AVE SE #15180		
		WASHINGTON	DC	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint Fu	undraising Representa	Leadership PAC Sponsor
8. <b>Desig</b>	nated Agent: Identify	by name, address (phone number - optional)		
Fu	ıll Name			
Ma	ailing Address			
		1	1 1 1 1	
Т	TILE OR POSITION '	CITY ▲	STATE ▲	ZIP CODE ▲
L		ı	ohone Number	
	or Other Depositori deposit boxes or main	es: List all banks or other depositories in which the	e committee deposit	s funds, holds accounts, rents
	of Bank,			
		I		1
	Mailing Address			
	Mailing Address			
	Mailing Address			

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h). <b>Joint F</b>	Fundraising Partic	cipant:			
1.			FEC II	number	С
2.			FEC II	) number	C
3.		<u> </u>	FEC II	number	C
4.			FEC II	) number	C
_	onnected Organi	zation, Affiliated Committee, Jo	oint Fundraising Rep	oresentative	, or Leadership PAC Sponsor
Mailing Ad	dress PO	BOX 558			
	BILI	LINGS		MT	59102
Relationshi	ip:	CITY ▲		STATE A	ZIP CODE ▲
	Connected Organi	ization Affiliated Committee	X Joint Fundraising	g Representa	tive Leadership PAC Sponso
8. Designated Age	nt: Identify by nar	me, address (phone number - c	optional)		
Full Name					
Mailing Addr	ess				
Mailing Addr	ess				
Mailing Addr	ess				
	ess L POSITION ▼	CITY A		STATE A	ZIP CODE A
		CITY A	Telephone N		ZIP CODE <b>A</b>
TITLE OR F	POSITION V	st all banks or other depositories	Telephone N	umber	
TITLE OR F	POSITION ▼  Depositories: Lis	st all banks or other depositories	Telephone N	umber	
9. Banks or Other safety deposit bo	POSITION ▼  Depositories: Listoxes or maintains	st all banks or other depositories	Telephone N	umber	
9. Banks or Other safety deposit both Name of Bank, Depository, etc.	POSITION ▼  Depositories: Listoxes or maintains	st all banks or other depositories	Telephone N	umber	
9. Banks or Other safety deposit both Name of Bank, Depository, etc.	POSITION ▼  Depositories: Listoxes or maintains	st all banks or other depositories	Telephone N	umber	